

Rental Application (PLEASE PRINT) Today's Date _____

Applicant's Name (First, Middle Initial, Last) _____		Social Security # _____	Date of Birth _____
Home Phone _____	Work Phone Number _____		E-Mail Address _____
Current Address _____	APT # _____	City _____	State _____ Zip Code _____

Current Landlord Information				
Landlord Name _____	Landlords Phone # _____	\$ _____	Any Balance Due _____	Move In Date _____
				Move Out Date _____
Previous Landlord Information				
Previous Address _____	Apt # _____	City _____	State _____	Zip Code _____
		\$ _____		
Apartment Name _____	Property Manager _____	Landlords Phone # _____	Mo. Rent _____	Move In Date _____
				Lease ending date _____

Employer Information				
Present Employer _____		Work Phone # _____		
Employer's Address _____		City _____	State _____	Zip Code _____

\$Monthly Income\$ _____ \$Other Income\$ _____ Monthly Payments (Loans, Credit Cards, Car) _____
 Will rent be paid by You? _____ If not, by Who? _____ Have you ever declared bankruptcy? _____
 Have you ever been sued for nonpayment of bill? _____ Have you been convicted of a felony? _____
 How much is your current rent per month? \$ _____ What is your current rental balance? \$ _____

List names of any persons that will be living with you					
Name #1 _____	Age _____	Relationship _____	Name #2 _____	Age _____	Relationship _____
Name #3 _____	Age _____	Relationship _____	Name #4 _____	Age _____	Relationship _____
List name, phone number, and relationship of four references not living with you for emergency contact					
Name #1 _____	Phone # _____	Relationship _____	Name #2 _____	Phone # _____	Relationship _____
Name #3 _____	Phone # _____	Relationship _____	Name #4 _____	Phone # _____	Relationship _____

The undersigned persons represent that all the above statements are true and complete and hereby authorize verification of such information via credit reports, rental history reports, and other means. False information given above shall entitle owner to 1) reject this application, 2) retain the application fee, and 3) terminate the resident's right of occupancy.

Signature of Applicant _____ Date _____

Fax application to 217-328-6558